Fill in t	his information to identify your case:				nly as d	irected in this form and	in Form
Debtor	Morgan Chelsea Masters		122	2A-1Supp:			
Debtor (Spouse,			•	1. There is	no pres	umption of abuse	
United	States Bankruptcy Court for the: <u>Eastern District of</u>	Tennessee	_ [applies v	will be n	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	
Case r	number		_		•	,	
(,					does not apply now be reservice but it could ap	
				☐ Check if the	nis is a	n amended filing	
Offic	cial Form 122A - 1						
Cha	pter 7 Statement of Your Cur	rent Mor	thly Inc	ome			12/1
attach a case nu	complete and accurate as possible. If two married people as separate sheet to this form. Include the line number to with the line number to with the complete sharps and the service, complete and file Statement of Exemplete. Calculate Your Current Monthly Income	hich the addition m a presumption	al information a of abuse because	pplies. On the se you do not h	top of a	ny additional pages, writ narily consumer debts o	te your name and or because of
1. W	/hat is your marital and filing status? Check one or	nly.					
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.			
	Married and your spouse is NOT filing with you.	_					
	Living in the same household and are not lega	ally separated. F	Fill out both Col	lumns A and E	3, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	under nonban	kruptcy law th	at appli	es or that you and your	
101(the 6	n the average monthly income that you received from all 10A). For example, if you are filing on September 15, the 6-m 5 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not includ	igh August 31. It de any income a	the amo	ount of your monthly incomore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commissio	ns (before all	\$	0.00	\$	
	llimony and maintenance payments. Do not include tolumn B is filled in.	payments from	a spouse if	\$	0.00	\$	
o fr a fil	Il amounts from any source which are regularly part you or your dependents, including child support om an unmarried partner, members of your household roommates. Include regular contributions from a spalled in. Do not include payments you listed on line 3.	Include regular d, your depender oouse only if Col	contributions nts, parents,	\$	0.00	\$	
5. N	et income from operating a business, profession,		tor 1				
	trace receipts (hefers all deductions)	\$ 0.00	lor i				
	cross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00					
	let monthly income from a business, profession, or far	m \$ 0.00	Copy here ->	\$	0.00	\$	
	et income from rental and other real property	·					
		Deb	tor 1				
G	iross receipts (before all deductions)	\$ 0.00					
0	ordinary and necessary operating expenses	-\$ 0.00					
l N	et monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	

7. Interest, dividends, and royalties

\$

0.00

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Morgan Chelsea Masters Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 \$ \$ 0.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) x 12 0.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: TN Fill in the state in which you live. Fill in the number of people in your household. 1 53,004.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Morgan Chelsea Masters
Morgan Chelsea Masters
Signature of Debtor 1

Debtor 1 Mor	gan Chelsea Masters	Case number (if known)	
Date Ja	anuary 18, 2023		
M	M/DD/YYYY		
If you	u checked line 14a, do NOT fill out or file Form 122A-2.		
If you	u checked line 14b, fill out Form 122A-2 and file it with this forr	n.	